

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 701586-053653										
<p>In re Application of Charles R. Cantor</p> <table border="1"> <tr> <td>Application Number 10/542,043</td> <td>Filed September 15, 2005</td> </tr> </table> <p>For HAPLOTYPE ANALYSIS</p> <table border="1"> <tr> <td>Group Art Unit 1634</td> <td>Examiner KAPUSHOC, Stephen Thomas</td> </tr> </table>			Application Number 10/542,043	Filed September 15, 2005	Group Art Unit 1634	Examiner KAPUSHOC, Stephen Thomas						
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<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate entity fee are as follows (check time period desired):</p>												
<table> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$65/\$130)</td> <td>\$_____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$245/\$490)</td> <td><u>\$245.00</u></td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$555/\$1,110)</td> <td>\$_____</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$865/\$1730)</td> <td>\$_____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1,175/\$2,350)</td> <td>\$_____</td> </tr> </table>			<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$65/\$130)	\$_____	<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$245/\$490)	<u>\$245.00</u>	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$555/\$1,110)	\$_____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$865/\$1730)	\$_____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1,175/\$2,350)	\$_____
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<p><input checked="" type="checkbox"/> Applicant claims small entity status.</p> <p><input type="checkbox"/> A check to cover the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-0850</u>. I have enclosed a duplicate copy of this sheet.</p>												
<p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>												
<p>I am the <input type="checkbox"/> applicant/inventor</p>												
<p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p>												
<p><input checked="" type="checkbox"/> attorney or agent of record.</p>												
<p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a): _____</p>												
<p><u>/Leena H. Karttunen/</u> <u>December 17, 2008</u> Signature Date</p>												
<p><u>Ronald I. Eisenstein (30,628) / Leena H. Karttunen (60,335)</u> <u>(617) 345-6054 / 1367</u> Typed or printed name Telephone Number</p>												
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p>												